

Application Data Sheet

Application Information

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| Application Type:: | Regular |
| Subject Matter:: | Utility |
| Suggested Group Art Unit:: | N/A |
| CD-ROM or CD-R?:: | None |
| Sequence submission?:: | None |
| Computer Readable Form (CRF)?:: | No |
| Title:: | METHOD AND SYSTEM FOR OBTAINING PAYMENT FOR HEALTHCARE SERVICES USING A HEALTHCARE NOTE SERVICER |
| Attorney Docket Number:: | HO-P02782US0 |
| Request for Early Publication?:: | No |
| Request for Non-Publication?:: | No |
| Small Entity?:: | No |
| Petition included?:: | No |
| Secrecy Order in Parent Appl.?:: | No |

Applicant Information

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|---|-----------------------------------|
| Applicant Authority Type:: | Inventor |
| Status:: | Full Capacity |
| Given Name:: | Victor |
| Middle Name:: | C. |
| Family Name:: | York |
| City of Residence:: | Houston |
| State or Province of Residence:: | TX |
| Country of Residence:: | US |
| Street of mailing address:: | 3500 S. Gessner Road Suite 205 |
| City of mailing address:: | Houston |
| State or Province of mailing address:: | TX |
| Postal or Zip Code of mailing address:: | 77063 |

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Lawrence
Family Name:: York
State or Province of mailing address:: Kentucky
Country of Residence:: US
Street of mailing address:: 3736 Wembley Lane
City of mailing address:: Lexington
State or Province of mailing address:: Kentucky
Postal or Zip Code of mailing address:: 40509

Correspondence Information

Correspondence Customer Number:: 26271

Representative Information

Representative Customer Number:: 26271